

Week: _____

FOOD	SUN	MON	TUES	WED	THURS	FRI	SAT
Breakfast Every Day!	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fruits Eat More!	○○○○	○○○○	○○○○	○○○○	○○○○	○○○○	○○○○
Veggies Eat More!	○○○○	○○○○	○○○○	○○○○	○○○○	○○○○	○○○○
Sweetened drinks Aim for None!	○ ○ ○ ○ 0 1 2 3+	○ ○ ○ ○ 0 1 2 3+	○ ○ ○ ○ 0 1 2 3+	○ ○ ○ ○ 0 1 2 3+	○ ○ ○ ○ 0 1 2 3+	○ ○ ○ ○ 0 1 2 3+	○ ○ ○ ○ 0 1 2 3+
Low-fat Milk Drink Up!	○○○	○○○	○○○	○○○	○○○	○○○	○○○
Water Drink Up!	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○

ACTIVITY	SUN	MON	TUES	WED	THURS	FRI	SAT
Minutes of sitting time (TV, video games, computer, etc.) Go Easy!	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes
Move or walk every hour?	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○	○○○○ ○○○○
Minutes of activity Rev it Up! (includes outside play, chores, family activities, walking to school, sports, and more...)	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes	<input type="checkbox"/> # minutes

WELL BEING

I enjoyed the company of others at meals on these days:

Sun Mon Tues Wed Thurs Fri Sat

I ate mindfully on:

Sun Mon Tues Wed Thurs Fri Sat

I received adequate sleep on:

Sun Mon Tues Wed Thurs Fri Sat

Celebrate

Things I did well this week:

My New Goals

Things I could improve on:

For more Well-Being tools, tips and programs, visit www.parkview.com.